

## STATE OF NEW HAMPSHIRE

# 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### PLEASE PRINT

I. Name of Lobbyist(s) Karen Hic	cks		
II. Name of lobbyist's partnership.	, firm or corporation, if a	ny:	
Civix Strategy Group, LLC (Name of partnership	o, firm or corporation)		· ·
114 North Main Street, STE 203	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) <u>573-9661</u> (Telephone)	( )(Fax	e-mail <u>Karen@Ci</u>	vixstrategygroup.com
III. This statement covers: (Choose reportable expense transactions where the covers occurs of the covers occurs o	hich are not attributable	to any one client).	
(Full Name of OR ☐ All reportable transactions by the unrelated to any particular client.	Client as it appears on the Lo		firm listed below which are
IV. Date of Report April 24, 20 Reports cover: activity from date of October 30, activity from 7/.  V. There have been no fees rece	registration to 3/31/19 2019   1/19 to 9/30/19	July 31, 2019	
If this box is checked, complete just to Concord, NH 03301.	his form and submit it to th	he Secretary of State's Office, Si	tate House, Room 204,
VI. Check if additional reports are		~	
<ul> <li>If you have received fees or mad</li> <li>If you have paid an honorarium of Expense Reimbursement</li> </ul>	• • • • • •		•
☐ If you, your firm, or your family	has made political contrib	utions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by L I have read RSA 15, RSA 15-B, RSA and complete to the best of my know  (Signature of lobbyist)  Karen Hicks (Print Name of lobbyist)	14-C and RSA 664 and h	ereby swear or affirm that the formula the formula the formula the formula that the formula	oregoing information is true

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# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Karen Hicks	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Civix Strategy Group, LLC	
(Name of partnership, firm or corporation)	
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	it relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 900.00
b) Total of all fees received this calendar year, prior to this reporting period . (This should equal the total of all prior monthly reports for this calendar y	b) \$ <u>0.00</u> year)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>900.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of all ele: meals purchased during a businesses than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> <li>b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.</li> </ul>	a) \$ <u>0.00</u> b) \$ <u>0.00</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

	d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>0.00</u>
	e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>
	f) Total of all expenses year to date	f) \$ <u>0.00</u>
	VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.	obbying fees during this reporting
,	Paid to:	Amount:
	•	\$
		\$
		\$
		\$
		\$
		\$·
	·	
	•	
	Sworn Statement/Affirmation by Lobbyist	,
	I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
	Carentfuld	4.24.19
	(Signature of lobbyist)	(Date)
	(Print Name of Johnvist)	

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# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P	I. Name of Lobbyist(s)	Karen Hicks			
L E	II. Name of lobbyist's pa	l. Name of lobbyist's partnership, firm or corporation, if any:			
A					
S	Civix Strategy Group, LL	Cartnership, firm or corporation)	<del> </del>		
E	(Name of pa	amership, firm of corporation)			
P	III. Name of Client			Date *	
R					
l	Political Contributions		004.01		
N T		For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the			
•	chemoloboyist and lobby	lient/lobbyist and lobbying firm, indicate the following:			
		* ***			
	Full name of candidate:	Feltes	Dan		
	run name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)	
		,			
	Amount of contribution \$ _	2500.00	Office Candidate i	s Seeking <u>Incumbent NH Sen</u> ate	
	enter an estimated value and	`			
	Full name of candidate:	Craig	Joyce		
	•	(Last Name)	(First Name)	(Middle Name/Initial)	
	Amount of contribution \$ _	500.00	Office Candidate is	Seeking Incumbent Manchester Mayor	
		ntribution on the line abo		ds or services provided, and enter the ution. If the actual cost is not known,	
	Full name of candidate:		(P! )! )	(NASAJI) Nama - 15 - 15 - 15	
		(Last Name)	(First Name)	(Middle Name/Initial)	
	Amount of contribution \$ _		Office Candidate is	Seeking	

f the contribution is an in-kind contribution, provide a des ctual cost of the in-kind contribution on the line above for nter an estimated value and the word "estimate."	r amount of contribution. If the actual cost is not known
f more than three contributions were made, report additional con	ntributions on separate addendum C forms.)
worn Statement/Affirmation by Lobbyist	
have read RSA 15, RSA 15-B and RSA 664 and her strue and complete to the best of my knowledge and	
Signature of lobbyist)	4/24/19
(Signature of loodyist)	(Date)
Karen Hicks (Print Name of lobbyist)	
• •	
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# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

	affirmation by Lobby ne and Expenses for:		
Name of Lobbying pa	rtnership, firm, or corpo	oration: Civix Strategy Gr	oup, LLC
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check	one):		•
April 24, 2019 ☑	July 31, 2019 🛘	October 30, 2019 🗆	January 29, 2020 □
I have read RSA 15, I the following Addend submitted):	RSA 15-B, RSA 664, the ums submitted with the	ne Statement of Income ar at Statement (insert the no	nd Expenses described above, and umber of Addendum forms being
1_ Addendum A(	s).		
Addendum B(	s).	•	
1 Addendum C(	s).		
	my knowledge and bel		t and each Addendum is true and  4/24/19 (Date)
Karen Hicks			
(Drint Nama of Johnvie	\		

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APR 2 4 2019

NEW HAMPSHIRE
DEPARTMENT OF STATE